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FISCAL IMPACT STATEMENT

LS 7111

BILL NUMBER: HB 1082

NOTE PREPARED: Jan 1, 2015

BILL AMENDED:

SUBJECT: Diabetes Assessment Report.

FIRST AUTHOR: Rep. Macer

FIRST SPONSOR:

BILL STATUS: As Introduced

FUNDS AFFECTED: ☒ **GENERAL**
DEDICATED
☒ **FEDERAL**

IMPACT: State

Summary of Legislation: This bill requires the Indiana State Department of Health (ISDH), the State Personnel Department, and the Office of the Secretary of Family and Social Services (FSSA) to: (1) collaborate to identify plans to reduce the incidence of diabetes and diabetes complications; and (2) submit a report to the General Assembly by January 1, 2016, concerning the financial impact of diabetes and diabetes complications in Indiana and plans to reduce the incidence of diabetes in Indiana.

The bill also requires the ISDH, the State Personnel Department, and FSSA to prepare a subsequent written report on the same information for the General Assembly by January 1, 2018.

Effective Date: July 1, 2015.

Explanation of State Expenditures: This bill has specific requirements of each of the three agencies named to collaborate to produce the reports for the General Assembly by 2016 and 2018. Based on other states' findings and implementation actions, the requirements of this bill may be met within the current level of resources available to the ISDH, State Personnel, and FSSA. Federal grant funds may also be available for certain activities. While agencies may have the resources to implement this requirement, other functions or activities may be delayed in order to meet the reporting requirements of the bill.

Additional Information: The federally funded Diabetes Prevention and Control Program has an annual budget of \$115,444.

In 2011 the ISDH produced a report titled “The Burden of Diabetes in Indiana” that includes some of the information required for the ISDH. This report, which would require updating, was funded by a grant from the Centers for Disease Control.

Kentucky’s statute required implementation using existing information or programs. Substantial existing staff resources were reported to have been used implementing Kentucky’s program.

In 2011 Texas passed legislation requiring a biennial assessment of existing state programs for the prevention and treatment of diabetes. The fiscal note associated with the legislation reported that no significant fiscal impact was anticipated since the Texas Department of State Health Services estimated that all additional work resulting from the legislation’s requirements could be performed within the level of current resources available to the agency.

Explanation of State Revenues:

Explanation of Local Expenditures:

Explanation of Local Revenues:

State Agencies Affected: ISDH, State Personnel Department, FSSA.

Local Agencies Affected:

Information Sources: ISDH Website, Diabetes Page at <http://www.in.gov/isdh/24966.htm>;
“Burden of Diabetes in Indiana”, ISDH, 2011, at http://www.in.gov/isdh/files/BR_Diabetes-2011.pdf ;

Summary of Texas and Kentucky’s bill fiscal impacts at Connecticut General Assembly, Office of Legislative Research, “Diabetes Programs and Laws, at <http://www.cga.ct.gov/2013/rpt/2013-R-0189.htm>

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